The original instrument was prepared by Cheryl Horne. The following digest, which does not constitute a part of the legislative instrument, was prepared by Ann S. Brown.

DIGEST

Long (SB 270)

<u>Proposed law</u> authorizes a health insurance issuer to establish and maintain benefit plans for group and individual insureds or enrollees that apply lower enrollee copayments for services provided by primary care physicians, except for chiropractic physicians, than for services provided by other types of physicians. Requires that any application of a lower copayment be clearly stated in policies and materials.

Proposed law provides definitions for "copayment," and "health insurance issuer."

<u>Proposed law</u> excludes from the definition of "primary care physician" other types of physicians assigned by the issuer to provide care and to coordinate care for insureds or enrollees with special needs.

<u>Proposed law</u> makes an exception for chiropractic physicians from the application of a lower insured or enrollee copayment for services provided by primary care physicians.

<u>Proposed law</u> provides that a health insurance issuer may apply the same lower copayments for services provided by physician extenders such as physician assistants and nurse practitioners.

<u>Proposed law</u> provides that implementation of <u>proposed law</u> shall have no effect on the total rate of reimbursement specified in an agreement between a health issuer and a health care provider.

Effective July 1, 2009.

(Adds R.S. 22:1014)

Summary of Amendments Adopted by Senate

Committee Amendments Proposed by Senate Committee on Insurance to the original bill.

- 1. Removes statutory references to R.S. 22:247 and 995.
- 2. Removes from the meaning of "primary care physician" other types of physicians assigned by the issuer to provide care and to coordinate care for insureds or enrollees with special needs.
- 3. Excepts chiropractic physicians from the application of a lower insured or enrollee

- copayment for services provided by primary care physicians.
- 4. Adds that a health insurance issuer may apply the same lower copayments for services provided by physician extenders such as physician assistants and nurse practitioners.
- 5. Provides that implementation of <u>proposed law</u> shall have no effect on the total rate of reimbursement specified in an agreement between a health issuer and a health care provider.

Senate Floor Amendments to engrossed bill.

1. Corrects a citation.